

Texas Juvenile Justice Department

Service Provider's Program Components & Narrative Documents FY'18

VIII. PROGRAM COMPONENTS AND NARRATIVE:

A. FOCUS NARRATIVE: TFL is willing and has the ability to comply with each TJJD program requirement, including the following:

- 1. Goals and objectives TFL's foster home programs are designed to meet the needs of youth referred by TJJD who need a home-like environment as a step-down program for re-entry into the community, as well as needs related to physical, neurological, social, psychological, suicidal risks, trauma, and abuse issues. Objectives include changing youth's negative and destructive behavior to positive and productive behavior, by way of a behavior management program, trauma intervention, wraparound, skills training, and weekly therapeutic services.
- 2. Caring for a maximum of 25 adolescents referred by TJJD, in various foster homes.
- 3. Foster homes designated to serve this population will not be co-ed habitations.
- 4. TFL is willing to accept transgender or intersex youth.

B. LICENSE AND CERTIFICATIONS OF PROGRAM STAFF AND RESUMES OF KEY PERSONNEL:

See attached

C. PROGRAM POLICIES AND PROCEDURES:

- 1. TFL is also willing to comply with all assigned TJJD rules, standards and amendments which apply to foster care, as well as to Federal Prison Rape Elimination Action Standards that will be developed in the future.
- 2. TFL is willing to comply with the terms and conditions stated in the TJJD Contract for Residential Services before commencement of services.

An emergency plan to respond to catastrophic events, called Disaster Emergency Plan (DEP), is reviewed annually by each designated foster home staff serving TJJD youth. This plan outlines procedures to be implemented in the event of a disaster, and all emergency contact names and telephone numbers are available in the handout material.

Youth and children placed in TFL foster homes, referred by Child Protective Services (CPS) or Juvenile Probation (JP), may be served in the same facility accepting TJJD referrals. TJJD youth interaction with other residents in care will be monitored by trained staff and foster parents with the support of video monitor systems. Social boundaries will be taught while protective measures are implemented. Behavior management techniques involving both negative and positive consequences, as well as trauma informed care, trauma intervention, and social skills training will be implemented routinely within a healing milieu. All TFL foster parents and TFL staff are thoroughly trained in

emergency behavior intervention techniques, and are prepared to utilize this intervention if the need arises at any time to protect all residents in care.

D. TARGET POPULATION

TFL will accept male and female youth from TJJD, requiring a Common Application with social and historical attachments for each youth. TFL staff and caregivers are fully aware of the population types including: General offenders; Type B violent offenders; sentenced offenders; type A violent offenders; and firearms offenders.

E. TRANSPORTATION

- 1. TFL foster parents are willing to assume transportation responsibilities after referral and before discharge. TJJD staff will arrange transportation at release from the foster home facility and the foster parent will be willing to transport the youth to a designated public location (example: bus station or airport.) Transportation will be provided in the foster parent's vehicle, such as an automobile or van. Each type of transportation is listed on the foster parent summary sheet.
- 2. All direct care staff and foster families are required to possess a current driver's license and liability insurance. A DPS driving record is required for all direct care staff to flag staff with excess traffic violations.

F. STAFF REQUIREMENTS

- 1. TFL Direct Care Staff
 - a. Direct care staff to youth ratio will be one staff (or foster parent) to 8 youth (1:8). This ratio complies with TDFPS Minimum Standards.
 - b. Agency management staff, Case Managers and Educators will not be counted for the purpose of this ratio.
 - c. Verified foster parents and their staff will plan and supervise recreational activities and leisure time while youth are residing in the home. School activities are supervised by the educational staff in school, except in situations where foster parents are contacted and requested to come to the school for intervention in specific misbehavior. There may be rare occasions where foster parents or their staff attends school classes with the youth, to offer support and encouragement in complying with truancy laws, as well as for enhanced academic performances
 - d. Foster parents and their staff are trained to monitor interactions between all residents, and will manage interactions between TJJD youth and CPS/JP youth in care. Supervision involves eyes-on every 15 minutes, or less when indications dictate closer supervision, such as suicidal ideation

or violent behavior. Video monitors serve the purpose of close monitoring by the foster parents, for protection of every resident in care. However video monitors are not utilized for recording purposes.

- e. Foster parents and their staff are accessible by cell phone during the day and are prepared to drive to the school to assist school personnel in the event of a crisis situation in or near classrooms.
- f. Foster parents and their staff who are verified by TFL must be age 21 or older. Direct care staffs who are employees of the agency (Case Managers) do not routinely supervise foster youth, although they are also required to be age 21 and older. Any "babysitters," providing services to foster homes that are under the age of 21, will not be allowed to supervise TJJD youth.
- g. Regarding TJJD's requirement of a "description of direct care staff schedules for weekdays and weekends:" direct care staff, or Case Managers who are employees of the agency, visit foster homes twice per month. One visit per month they speak privately with every youth resident in the home to ensure need fulfillment and safety, and the other visit they speak to the caregivers in the home regarding youth interactions and conduct an on-site inspection to ensure compliance with environmental regulations. Case Managers work weekdays from Monday through Friday, and not on weekends.

Foster home staff, called "Assistants" who work directly for foster parents in the home, work various hours depending upon the configuration of residents in the foster home. For example, if the home has a capacity of 6 youth and both foster mother and foster father are available during the daytime, an Assistant may work from 3:00 pm to 10:00 pm Monday through Friday and from 9:00 am to 5:00 pm on Saturday and Sunday. Another example is: if the foster home has a capacity of six youth with both foster mother and foster father available, no Assistant would be required at all. A third example is: if the foster father is employed from 8-5 on weekdays, an Assistant may work in the foster home from 3 pm to 10 pm helping the foster mother with homework, dinner, and bedtime routines before departing at 10:00 pm. Variations are too numerous to describe in specific detail for every foster home designated to care for TJJD youth.

h. See attached job descriptions for direct care staff, which are Case Managers working for the agency.

- 2. Clinical and Other Staff: TFL subcontracts with licensed Therapists for services to youth in care. All of our licensed Therapists are paid by a third party, Medicaid and will not be utilizing TJJD funds to pay for the therapist's services.
 - A. Each licensed Therapist has at least a Master's degree, plus a license. Each Therapist provides therapy once per week to 24 or less children or youth.
 - B. The "Facility Administrator" overseeing services to TJJD youth will be Leon J. Smith, L.P.C. and L.S.O.T.P., who is also the TFL Executive Director. He has been providing after hours on-call crisis services, as well as therapy to juvenile offender youth in several foster homes over the previous 23 years. These juvenile offenders were placed in foster homes that were simultaneously caring for CPS youth. See attached resume for Leon J. Smith.
 - C. Other staff positions include foster parents, foster home staff, and Case Managers. These individuals work as a team with the subcontracted Therapist and TFL administrative staff to ensure safe and efficient operation of the facilities. The Case Manager documents any clinical recommendations by the Therapist in the youth's Child's Plan of Service (CPOS) to be implemented by all other direct care positions.
 - D. See attached list of clinical and other staff positions, including copies of certifications and licenses. This list will be submitted to the TJJD Program Evaluator.
 - E. See attached job descriptions for clinical and other staff positions, defining duties, knowledge, skill, and abilities. Experience in working with juvenile offenders will be noted in the list of clinical and other staff positions above.
- 3. Training and Restraint Technique: Prior to verification as foster parents or their staff and annually thereafter, Emergency Behavior Intervention (EBI) training is a prerequisite according to TFL Policy. No individual is allowed to supervise foster children or youth in care without this training. TFL is willing to schedule all designated caregivers and direct care staff to receive training for specific content relating to TJJD requirements. Training in information and instruction related to duties include the following 18 areas.
 - A. The juvenile justice system of Texas, including the juvenile correctional facility system;
 - B. Security procedures;
 - C. The supervision of children committed to TJJD;
 - D. Signs of suicide risks and suicide precautions; (routinely provided)
 - E. Signs and symptoms of the abuse, assault, neglect, and exploitation of a child, including sexual abuse and sexual assault, and the manner in which to report the abuse, assault, neglect, or exploitation of a child; (routinely provided)
 - F. The neurological, physical, and psychological development of adolescents; (routinely provided)
 - G. The TJJD rules and regulations, including rules, regulations, and tactics concerning use of force:
 - H. Appropriate restraint techniques; (routinely provided)

- I. The Prison Rape Elimination Act of 2003;
- J. Rights and responsibilities of children in the custody of TJJD;
- K. Interpersonal relationship skills; (routinely provided)
- L. Social and cultural lifestyles of children in the custody of TJJD;
- M. First aid and cardiopulmonary resuscitation; (routinely provided)
- N. Counseling techniques; (routinely provided)
- O. Conflict resolution and dispute mediation, including de-escalation techniques; (routinely provided)
- P. Behavior management; (routinely provided)
- Q. Mental Health issues, and (routinely provided)
- R. Employee rights, employment discrimination, and sexual harassment. (routinely provided)
- S. Behavior modification, trauma intervention, and correctional/clinical treatment training is provided to all direct care staff annually and prior to verification. See attached training material.
 - 1. Training components reflect developmental and social understanding for juveniles, and include: developmental milestones for adolescents, sexual education, and building healthy relationships. Additionally training covers strategies for responding to aggressiveness, post-partum depression, promoting team building, channeling excessive energy, and promoting positive behavior. (See attached.)
 - 2. TFL will certify that each employee or foster parent whose primary duties include sole supervision of TJJD youth will have had adequate and proper training before assuming sole supervision responsibilities. (See Attached.)
 - 3. Designated caregivers and staff will receive specialized training prior to the referral of TJJD youth to the proposed program. Training will be conducted by Leon J. Smith, L.P.C. and Thad Smith, Specialist III with 15 years' experience in supervising juvenile offenders. (See attached training schedule.)
 - 4. The primary restraint technique to be used is the basket-hold and the basket-hold take-down. Secondary techniques include the escort and removal of dangerous objects. All direct care staff involved in TJJD will be trained in Emergency Behavior Intervention.
- T. TFL training components reflect developmental and social understanding for juveniles, developmental milestones, sexual education, and building healthy relationships. It will include strategies for responding to aggressiveness, postpartum depression, promoting team building, channeling excessive energy, and promoting positive behavior.

G. HOURS OF OPERATION AND PROGRAM SCHEDULE

- 1. TFL currently has the proposed facilities in operation 24 hours per day, 7 days a week at the required staffing ratios.
- 1. The TJJD requirement for a "Daily and Weekend Schedule" that includes all program activities is not a uniform schedule. Each foster home has their own daily schedule that includes the following:

Wake-up 6:00 am (except in summer months)
Showers & dressing 6:15 am
Breakfast 6:30 am
Catch school bus 6:45 am
Public school 8 am to 3:30 pm

Catch school bus
Leisure time
Homework
Outdoor sports

3:30 pm
4:00 pm
5:00 pm
5:30 pm

Outdoor sports 5:30 pm
Dinner 6:00 pm
Household Chores 6:30 pm
Home movie 7:00 pm
Showers & bedtime 9:30 pm

During the summer months, the schedule changes to include the following recreational activities:

Wake-up 8:00 am to 9:00 am

Showers & dressing 9:00 am Breakfast 9:15 am

Recreational activity, such as but not limited to, baseball, basketball, swimming, ATV riding, horseback riding, boat riding/fishing, boat riding/inner tube pulls, Texas Parks & Wildlife quail seed planting, Fiesta Texas field trip, Six Flags field trip, etc.

Lunch 12:00 noon

Complete the field trip

Dinner 6:00 pm Household chores 6:30 pm Video games 7:00 pm Showers & bedtime 9:30 pm

H. ASSESSMENT TOOLS: Therapists will subcontract with TFL to provide therapy and assessments to each TJJD youth.

ASSESSMENT: The CANS (Child and Adolescent Needs and Strengths) was developed from a communication perspective so as to facilitate the linkage between the assessment process and the design of individualized service plans including the application of evidence-based practices. The way the CANS works is that each item suggests different pathways for service planning. There are four levels of each item with anchored definitions; however, these definitions are

designed to translate into the following action levels (separate for needs and strengths). The Clinical Director and Wraparound Care Coordinator will determine the best pathway for treatment for TJJD Youth's Treatment Plan.

- I. **HEALTH CARE**: Providing health care for TJJD youth, including medical, dental, and prescriptions.
 - 1. TFL will enroll each TJJD youth at placement in Medicaid in order to cover health care services. In the event the youth is covered under their biological parents' insurance, TFL will arrange for the youth to be removed from the parents' coverage and submit that information to Medicaid along with an application for Medicaid coverage. Health care includes therapy as well as medical and psychiatric services.
 - 2. TFL is exempt from the requirement to identify health care providers in the local community that are interested in providing health care to TJJD youth, due to being a child-placing agency. Therapists will subcontract with TFL to provide therapy and assessments to each TJJD youth. Therapy is routinely provided in the foster home or in the school environment. Foster parents transport children and youth in care to psychiatric and psychologist visits for consultation, as mandated by TDFPS.
 - 3. TFL is willing to provide a psychiatrist for medication management for youth on psychotropic medications. Foster parents routinely schedule appointments with psychiatrists in close proximity to the foster home for this purpose.
 - 4. All caregivers whose duties include the administration of psychotropic medications will be trained in the administration and side effects for these medications. This training is updated annually, documented in training/personnel files, and conducted by a registered nurse, pharmacist, or medical doctor.
 - 5. TFL foster parents are willing to provide over the counter medications, medical supplies, and first aid to TJJD youth.
 - 6. TFL is willing to provide supervision for youth sent off-site to a medical hospital. Supervision by a verified respite staff will be provided at a rate of 1 staff person per youth for the duration of the hospital stay. This does not apply for psychiatric hospital admissions.
 - 7. TFL foster parents are willing to transport TJJD youth to and from health care appointments in their own vehicles.
 - 8. On-call nursing staff will be available by phone or pager, when required for on-site emergency situations. Foster parents are trained to transport youth to medical facilities for emergency assessment and treatment, as well.

- 9. All eligible TJJD youth will be enrolled in the Medicaid system by the designated TFL Case Manager. Psychiatrists, psychologists, and therapists will bill Medicaid directly.
- **J. EDUCATIONAL SERVICES:** TFL ensures the provision of educational services as required by state and federal law. Local public education agencies, accredited by the Texas Education Agency, are utilized. Additional educational opportunities or services are rare, and may include home schooling or private classes in the arts.
 - 1. TFL foster parents will send TJJD youth to public schools, and work with school officials to manage behavior and maintain acceptable grades. Local school systems (LEA) are accustomed to providing a full-day education program for youth in foster care.
 - 2.Academic course work will be determined by the local ISD system, as required by state and federal law. Course work targeting skills for GED will also align with TEKS and provide students with TEA credits. Students currently with a GED may continue to work towards a diploma, if desired. All teachers are appropriately certified for all courses including Special Education, through the local ISD's.
 - 3. TFL foster parents and case managers will advocate for services provided by the LEA that are specifically significant for female adolescents, and will document these efforts.
 - 4. The annual school schedule is determined by the local ISD's. Therefore schedules are not attached to this proposal. In the event that TJJD requires them anyway, TFL will endeavor to obtain this information from every school district in close proximity to the foster families. Youth will be engaged in activities during school holidays or summer months, including field trips to amusement parks (such as Fiesta Texas or Sea World in San Antonio, or Six Flags in San Antonio, etc.); community sports teams (such as baseball or soccer); attending community events (such as local theatrical plays or Texas Parks & Wildlife outdoor day events); movies; dining out; boating and fishing trips; swimming; camping; cook-outs; foster family reunions; church activities; and sports events, etc. to name a few.

K. CLOTHING, NUTRITION AND HYGIENE ITEMS:

- 1. Clothing Clothing inventories are updated by TFL Case Managers quarterly, listing each item including anything new. TFL Case Managers will monitor to ensure the foster parents provide these minimal articles of clothing for TJJD youth:
 - 1. Socks
 - 2. Underwear
 - 3. Pants
 - 4. Shirts
 - 5. Shoes

- 6. Recreational clothing
- 7. Sweatshirts, jackets or other seasonally appropriate outer clothing.
 - 1. Each youth will have his/her own socks, and underwear. The number of changes that a TJJD youth will need will depend on the laundry schedule of the foster home. At release, youth will be given the clothes that they wear leaving the program along with at least any new articles of clothing purchased by foster parents during their tenure in the foster home.
 - 2. TFL will provide a list of clothing for each TJJD youth, in the form of a "Clothing Inventory" that is updated quarterly.
 - 3. Procedures for distributing clothing involves documentation of each youth's clothing article in the Clothing Inventory, and the foster parent purchases new clothing items every month or two, as necessary.
 - 4. The TFL Case Manager will monitor TJJD youths' clothing monthly to ensure clothing is clean, properly fitted, not threadbare, and seasonally appropriate for all activities, and not an impediment to the developmental progress of the youth.
 - 5. Laundry schedules for each foster home caring for TJJD youth will vary, depending upon the number of youth in care. Typically, laundry is every other day, and the youth is taught the proper procedures for doing his/her own laundry. Laundry schedules are not attached, due to the number of variations. Foster parents adhere to TDFPS Standards of time frames for changing bed linens and other cleanliness issues.
- 2. Nutrition Foster parents within the TFL system are willing to:
 - a. Provide nutritious meals that meet all DFPS licensing standards.
 - b. Foster parents who serve less than 10 TJJD youth are not required to have a registered dietitian certify each meal annually. Menus will include a healthy variety of food, and are monitored by the TFL Case Manager twice per month for nutritious content. Foster parents that house 11 or more TJJD youth will have menus certified annually by a registered dietitian. However, foster parents in TFL agency may only house a maximum of 6 youth.
 - c. Meet nutritional requirements of TJJD youth according to age, gender, activity level, and any identified special physical or medical needs.

- d. Foster parents have no need for a certified Food Service Manager on site. Because the maximum number of youth verified to reside in any TFL foster group home is 6, a certified Food Service Manager would not be necessary.
- e. TFL foster parents routinely participate in the National School Lunch Program/School Breakfast Program, by registering their residents at the beginning of each school year. Foster parents comply with TDFPS Minimum Standards regarding nutritious meals, including providing breakfast and lunch prior to student enrollment into the program.
- f. Foster parents follow all applicable state and local sanitation and health standards, as recorded in the required Health Department inspections.
- g. Foster homes designated for TJJD do not require more than one inspection annually, according to DFPS standards, due to close, monthly monitoring of TFL Case Managers.
- h. Foster homes are not required to have a food establishment permit.
- i. Foster parents are not required to keep temperature records for food storage, preparation and service. This practice was discontinued as being unnecessary by DFPS several years ago.
- j. Diets for TJJD youth will comply with TDFPS requirements for nutritional content. Therefore, foster parents with a maximum of 6 youth will have no need to follow Recommended Dietary Allowances from the National Research Council that is required if housing 10 or more TJJD youth.
- k. Foster parents are not required to record menus for the week, as every resident is served the same dish that all other residents are served, in a normalized home setting. Case Managers will monitor dietary choices and substitutions twice per month, to note any problem areas to be staffed by the Treatment Team. Foster parents do not cook separate meals for an individual resident, unless medically necessary and ordered by an M.D. The following rule does not apply to TFL foster homes housing a maximum of 6 youth: If a foster home houses 10 or more TJJD youth, they will serve portions of food as indicated on their menus; any substitution will then be recorded and kept on file for 3 years.
- 1. Food production records will not be required for each meal and snack. Foster parent do not "produce" foods, nor do they purchase food from production companies. The following rule does not apply to TFL foster homes housing a maximum of 6 youth: If foster parents house 10 or more TJJD youth then they will keep food preparation menus for each meal and snack.

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- m. A registered dietitian will be retained by foster parents to provide consultation only in the event any youth in care requires special medical and/or religious diets. If this situation occurs, diet orders and service of meals will be documented and kept on file. Otherwise, a registered dietitian will not be required for consultation in foster homes.
- n. Case Managers will monitor the quality of meals served in the foster homes and group homes. Foster parent's initially determine the menus for the week, and ensure quality regarding variation and proper nutrition.
- o. Foster parents and their assistants routinely eat the same meals as all residents, meals that are prepared by the foster parent.
- p. Calorie content of the 3 meals and 2 snacks per day is approximately 1,800 calories per day. At least 2 meals are hot, typically a hot breakfast (fried eggs with toast, waffles or pancakes, and/or hot oatmeal, etc.) and a hot evening dinner.
- q. TFL foster parents and staff are trained to comply with TDFPS Standards mandating that food cannot be used as disciplinary measures. Case Managers routinely monitor this for compliance.
- r. TFL Policy mandates that all tools, equipment, hazardous materials, and chemicals be kept in a locked container, with the foster parent or assistants being required to protect the location of the key. If an individual youth wishes to assist the foster parent with equipment, such as a lawn mower, the foster parent is required to be in close supervision at all times. No equipment is to be left out and accessible to any adolescent resident.
- s. Foster parents are trained to ensure a maximum of 14 hours from the beginning of evening dinner to the beginning of breakfast. Case Managers monitor for compliance.

3. Hygiene

- a. TFL agrees to provide a list of hygiene items to be made available to each TJJD youth.
- b. These items will be distributed by foster parents or assistants to each TJJD youth at admission to the foster home.
- c. Each foster parent is willing to provide appropriate gender specific hygiene items, including ethnic hair and skin care products.

L. FOOD SERIVICES:

Nutrition - Foster parents within the TFL system are willing to: a. Provide nutritious meals that meet all DFPS licensing standards.

- b. Foster parents who serve less than 10 TJJD youth are not required to have a registered dietitian certify each meal annually. Menus will include a healthy variety of food, and are monitored by the TFL Case Manager twice per month for nutritious content. Foster parents that house 11 or more TJJD youth will have menus certified annually by a registered dietitian. However, foster parents in TFL agency may only house a maximum of 6 youth.
- c. Meet nutritional requirements of TJJD youth according to age, gender, activity level, and any identified special physical or medical needs.
- d. Foster parents have no need for a certified Food Service Manager on site. Because the maximum number of youth verified to reside in any TFL foster group home is 6, a certified Food Service Manager would not be necessary.
- e. TFL foster parents routinely participate in the National School Lunch Program/School Breakfast Program, by registering their residents at the beginning of each school year. Foster parents comply with TDFPS Minimum Standards regarding nutritious meals, including providing breakfast and lunch prior to student enrollment into the program.
- f. Foster parents follow all applicable state and local sanitation and health standards, as recorded in the required Health Department inspections.
- g. Foster homes designated for TJJD do not require more than one inspection annually, according to DFPS standards, due to close, monthly monitoring of TFL Case Managers.
- h. Foster homes are not required to have a food establishment permit.
- i. Foster parents are not required to keep temperature records for food storage, preparation and service. This practice was discontinued as being unnecessary by DFPS several years ago.
- j. Diets for TJJD youth will comply with TDFPS requirements for nutritional content. Therefore, foster parents with a maximum of 6 youth will have no need to follow Recommended Dietary Allowances from the National Research Council that is required if housing 10 or more TJJD youth.
- k. Foster parents are not required to record menus for the week, as every resident is served the same dish that all other residents are served, in a normalized home setting. Case Managers will monitor dietary choices and substitutions twice per month, to note any problem areas to be staffed by the

Treatment Team. Foster parents do not cook separate meals for an individual resident, unless medically necessary and ordered by an M.D. The following rule does not apply to TFL foster homes housing a maximum of 6 youth: If a foster home houses 10 or more TJJD youth, they will serve portions of food as indicated on their menus; any substitution will then be recorded and kept on file for 3 years.

- l. Food production records will not be required for each meal and snack. Foster parent do not "produce" foods, nor do they purchase food from production companies. The following rule does not apply to TFL foster homes housing a maximum of 6 youth: If foster parents house 10 or more TJJD youth then they will keep food preparation menus for each meal and snack.
- m. A registered dietitian will be retained by foster parents to provide consultation only in the event any youth in care requires special medical and/or religious diets. If this situation occurs, diet orders and service of meals will be documented and kept on file. Otherwise, a registered dietitian will not be required for consultation in foster homes.
- n. Case Managers will monitor the quality of meals served in the foster homes and group homes. Foster parent's initially determine the menus for the week, and ensure quality regarding variation and proper nutrition.
- o. Foster parents and their assistants routinely eat the same meals as all residents, meals that are prepared by the foster parent.
- p. Calorie content of the 3 meals and 2 snacks per day is approximately 1,800 calories per day. At least 2 meals are hot, typically a hot breakfast (fried eggs with toast, waffles or pancakes, and/or hot oatmeal, etc.) and a hot evening dinner.
- q. TFL foster parents and staff are trained to comply with TDFPS Standards mandating that food cannot be used as disciplinary measures. Case Managers routinely monitor this for compliance.
- r. TFL Policy mandates that all tools, equipment, hazardous materials, and chemicals be kept in a locked container, with the foster parent or assistants being required to protect the location of the key. If an individual youth wishes to assist the foster parent with equipment, such as a lawn mower, the foster parent is required to be in close supervision at all times. No equipment is to be left out and accessible to any adolescent resident.
- s. Foster parents are trained to ensure a maximum of 14 hours from the beginning of evening dinner to the beginning of breakfast. Case Managers monitor for compliance.

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M. TREATMENT SERVICES:

TFL offers correctional treatment to youth while in the foster home setting, provided by subcontracted licensed mental health professionals. TFL will accept sex offenders into foster care, and will ensure sexual behavior treatment services will be provided. See attached list of resources for referrals to clinicians willing to provide services in the area of mental health, chemical dependency, and or sex offender treatment. TFL is willing to provide the following:

- 1. ASSESSMENT: The CANS (Child and Adolescent Needs and Strengths) was developed from a communication perspective so as to facilitate the linkage between the assessment process and the design of individualized service plans including the application of evidence-based practices. The way the CANS works is that each item suggests different pathways for service planning. There are four levels of each item with anchored definitions; however, these definitions are designed to translate into the following action levels (separate for needs and strengths). The Clinical Director and Wraparound Care Coordinator will determine the best pathway for treatment for TJJD Youth's Treatment Plan.
- 2. INTENSIVE CASE MANAGEMENT -WRAP AROUND: The Texas Institute for Excellence in Mental Health within the Office of the Associate Dean for Research at the University of Maryland is partnering with the National Wrap around Implementation Center to develop in-state capacity to train and coach wrap around facilitators and supervisors and assess the quality of Wraparound Planning. TFL has an agreement with The University of Maryland to provide services to support the implementation of high fidelity wrap around. fidelity Wrap Around is an ecologically-based process and approach to care planning that builds on the collective action of a committed group of family, friends, community, professional and cross-system supports mobilizing resources and talents from a variety of sources resulting in the creation of a plan of care that is the best fit between the family vision and story, team mission, strengths, needs and strategies. During the wraparound process, the youth and family team work collaboratively utilizing the strengths of the team, culture, and community to develop an individualized plan of care for the youth, their own parents, and foster parents. The team meets to implement this plan, monitor the efficacy of the plan and work towards success over time. Connections are made to find support systems naturally within faith-based, community, and family, as well as formal supports, such as educational, professional, medical, juvenile justice, etc. The TFL Care Coordinator will implement the following stages of Wrap Around.
- 3. <u>SKILLS TRAINING</u>: In addition to the WRAP AROUND services provided, the Treatment Team will determine the best fit of evidence-based Skills Training by utilizing the e-CANS assessment. It is estimated that the TJJD Youth may have one hour of Skills Training per week.

- a. Aggression replacement techniques (ART) These techniques can be used to treat children and youth with anger issues, oppositional defiant behavior, conduct disorder, and delinquent behavior.
- b. Nurturing Parenting This evidence-based skills training is a Tertiary Prevention-Treatment for biological parents or caregivers of children and youth receiving mental health services. It treats abusive or neglecting parent-child dysfunctional interactions and develops caregiver's pro-social skills that will help the functioning of both the child and caregiver.
- c. Seeking Safety This is a present-focused therapy (skills training) to help individuals attain safety and recovery from trauma/PTSD and substance abuse.
- d. Preparing Adolescents for Young Adulthood (PAYA) This skills training curriculum is to be used with youth ages 14-17 facing issues related to transitioning from adolescence to adulthood.
- e. Sexually Problematic Behavior: If TJJD youth's previous behavior indicates sexual problematic history the following assessments/programs may be implemented.
 - a. Abel Assessment: The Abel Assessment for sexual interest-2 (ASSI-2) is a complex assessment used by clinicians to evaluate adolescents and teens with sexual behavior problems. Through extensive research and with a stringent validation process, Dr. Abel created the computerized assessment tool. Leon Smith may administer this to determine sex offender tendencies.
 - b. Chaperone Training- The Chaperone training is supervised by Leon Smith, LSOTP. This training educates biological parents or caregivers of overall dynamics of sex offenders and is customized to the offender. The program is designed to prevent further victimization, assist offenders in controlling their inappropriate and sexually offending behavior, increase awareness of dynamics and scope of sexual abuse, and provide information and tactics for effective chaperoning of sex offenders.
 - c. Pathways to Healthy Sexuality/ Journey's After Care Workbook- This program was developed by psychologist and licensed sex offender treatment provider Matthew Ferrara, guides sex offenders participating in treatment programs into rebuilding their lives and changing their desires. This revolutionary manual uses both cognitive therapy and cutting-edge treatments to lead the offender through a series of therapeutic experiences designed to reduce the chance of another sexual offense. Upbeat and positive, Pathways to Healthy Sexuality is designed to give offenders confidence and self-respect, bringing them even closer to their goal of "No More Victims."

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- f. THERAPEUTIC RECREATIONAL PROGRAM: TJJD Youth and Families will be encouraged to participate in family recreational activities. The Creedmoor Ranch facility provides opportunities for families to participate in BBQ, horseback riding, swimming, and ATV riding under the supervision of professionals.
- g. INTERACTIVE VIDEO CONFERENCING: TFL has the capability to provide and utilize interactive video conferencing equipment for families that reside in remote locations. Tele-communication services can be arranged using computer/software/camera equipment to connect family members who might not be living in the same vicinity at the TJJD Youth. Additionally, the equipment could be used to connect youth with their biological family or foster parents, if the TJJD youth is located in the TJJD secured facility.
- h. DATA COLLECTION: TFL has developed a database system to collect, analyze and report evaluation data. A customized record will be created for each TJJD youth to input and track monthly progress. Data charts will be created so TFL Care Coordinators can easily identify the strengths and weaknesses indicated in the CANS results.
- 4. TRAUMA INTERVENTION: Trauma Intervention deals with the major themes and symptoms of trauma and encourages recovery by integrating explicit memories in the hippocampus with the implicit memories of the amygdala. In trauma, behaviors are driven by feelings and sensations and not by thoughts or rational thinking. This means clients must explore the underlying themes of triggered memories, and uncomfortable feelings and body sensations to reduce fear reactions, and unproductive and self-defeating behaviors.
- 5. ADMISSIONS CRITERIA, INCLUDING MATCHING: Referrals to TFL are "matched" for the most effective treatment environment. Based upon prescreened information, caregiver preferences are matched to the needs of the referred youth. This process has proven to be effective for increased client benefits for the past 23 years.
- 6. Proof that the treatment provided is evidence-based and appropriate for the population served, and that all staff providing the program are properly trained in the treatment program is offered. All subcontracted Therapists are licensed and are required to maintain a specific number of training hours annually. TFL subcontracts with at least four Therapists who are certified as Sex Offender Treatment Providers, and will add additional names as this list is updated.
- 7. Timelines for treatment completion and treatment objectives, are recorded in weekly therapy reports.
- 8. TFL and its designated foster parents are willing to comply with TJJD's Quality Assurance and Monitoring Standards.

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- 9. Upon request, copies of the Child's Plan of Services (CPOS) will be provided by TFL to TJJD staff for review on approved forms. The agency CPOS form will be submitted to TJJD for authorization to be utilized in this context.
- 10. TFL will provide case management through coordinated work with the TJJD Primary Service Worker and/or Parole Officer assigned, and will work with biological families to assist in re-integration into the community upon release. Additionally, foster families are willing to consult with biological families on the most successful methods for managing negative behavior, specific to their own child, and to allow biological parents to observe daily interactions in the foster home.
- 11. TFL's evidence-based "Behavior Modification Treatment System" that modifies negative behavior and enhances positive behavior and skills is described as such: Foster parents utilize a "Behavior Management" program consisting of rules, negative consequences for breaking a rule, and positive consequences for complying with house rules. To efficiently track this behavior/consequence sequence, some families utilize a board composed of 3-5 levels of behavior, with level one earning the most privileges and level 5 earning no privileges.
 - a. Each resident has a name tag which is moved at the end of the week to the appropriate levels, according to the youth's compliance (or lack of compliance) with house rules all week.
 - b. On Fridays the foster parents call a meeting with all residents, to discuss the most appropriate consequences and ways to avoid landing on the most restrictive level. Residents receive complimentary and encouraging support from other residents during this process. Typically a "role model" emerges among the residents, who evokes admiration and emulation.
 - c. Those whose name tag is on level one receives all privileges the preceding week.
 - d. Documented reports filed in the youth records reveal steady and gradual improvement in all areas addressed in the Individual Service Plan, based upon this system.
- 12. The Treatment Program involves individual counseling, family therapy, and experiential groups on a weekly basis. Didactic presentations by the Therapist occur approximately once a quarter, involving information sharing and discussions about emerging issues.
- 13. Recreational activities are routinely provided by the Foster Parents as well as upon occasion by the subcontracted Therapist. These events such as baseball games and other sports provide experiences that teach team building and accountability. Other activities such as fishing and camping emphasize positive social interaction and relationship building.
- 14. This program has the capability of measuring and documenting each youth's progress throughout his/her stay. This is done through the Child's Plan of Service (CPOS) that is reviewed and updated every quarter, and daily "Contact Logs"

- written by the Case Manager. The foster parents also record each resident's progress in achievements, including academia, mental health, or behavioral issues, etc.
- 15. All records will be maintained by TFL and will be produced upon request by TJJD.
- 16. TJJD staff may observe clinical services at any time.

CASE MANAGEMENT REQUIREMENTS:

- 1. TFL case managers will maintain clinical, medical, and educational documentation for all TJJD youth in their care. To the extent allowed by the Health Insurance Portability and Accountability Act (HIPPA) and other federal, state and local laws, TFL case managers shall give copies of such records to a youth's TJJD Primary Service Worker within 5 business days of completion, or another time period specified by TJJD. Documentation of clinical service sessions will remain in the youth's file at the TFL branch office and made available to appropriate TJJD staff upon request.
- 2. TFL case managers will submit to TJJD each youth's Preliminary Service Plan (PSP) within 7 days of arrival. This plan will incorporate risk and protective factors to be targeted for the youth based on information in the completed risk and protective factor assessment sent by TJJD. It will include 30 day treatment/ program goals and an outline for services.
- 3. TFL will ensure youth are seen by appropriately licensed and/or qualified professionals. Services will be provided in accordance with youth need and clinician recommendation. Documentation of sessions will remain in the youth's file at the contract facility with copies of all documented services going to the TJJD Primary Service Worker.
- 4. TFL case managers will develop a Child's Plan of Service (CPOS) based on the clinical and risk/protective factors of the youth. The plan will be written in a manner that the youth can understand and will include the following:
 - a. Identify behavior risks to be targeted for clinical/behavioral interventions;
 - b. Educational/vocational needs and plan for intervention;
 - c. Risk factors and protective factors to be targeted in clinical services and programming;
 - d. Identify any special needs of youth in order to provide appropriate services listed in the youth initial plan;
 - e. Identify plans for Family Participation/Transition planning; and
 - f. The objectives must be specific and measurable with 30-day timeframes for completion until transition.
- 5. TJJD youth treatment plans will be reviewed and updated monthly. The monthly treatment plan reviews and documents the youth's progress for the previous review period, and will identify and address risk and protective factors' interventions. Documentation of this review will be kept on a common form and placed in the youth's file within 5 days of the review. A written copy will be provided to the designated TJJD staff member within 5 workdays after the review.

- 6. TFL case managers will formally reassess risk and protective factors, via an approved assessment tool, every ninety days to evaluate the youth's progress in reducing risk and increasing protective factors. At this time, the updated Child's Plan of Service (CPOS) will address interventions necessary to meet the best interests of the youth, to identify aftercare needs, and to review continued need for the placement based on treatment needs and assigned length of stay. The TJJD Primary Service Worker should be contacted for their input. Biological Families must be invited by written notice to attend and participate in the 90-day review.
 - a. The tool to reassess risk and protective factors will be approved by TJJD prior to evaluating youth. This tool will be used to reassess TJJD youth progress every 90 days. At this time the updated treatment plan will address interventions necessary to meet the best interests of the youth, to identify aftercare needs, and to review continued need for the placement based on treatment needs and assigned length of stay. The Parole Officer will be requested to provide input. Biological and foster families will be invited by written notice to attend and participate in the 90 day reviews. Families will also receive a follow-up phone call.
- 7. Begin aftercare planning with the youth's TJJD Primary Service Worker or Parole Officer within 30 days of arrival. The plan will include specific referrals and services identified for youth with input from family. A final transition plan will be ready no less than 30 days prior to the youth's release from the program and will have been developed with the family and TJJD Primary Service Worker or Parole Officer.
- 8. TFL case managers will document all (unsuccessful) attempts to get input from the youth's family, TJJD Primary Service Worker and/or Parole Officer.
- I. At any time, TJJD Quality Assurance, Treatment, youth's Parole Officer or Release Review Panel Staff may review or receive copies of a youth's monthly treatment plans, 90-day re-assessment, clinical documentation and/or correctional therapy notes.

N. YOUTH RIGHTS, YOUTH COMPLAINT AND RESOLUTION SYSTEM, AND PERSONAL FUNDS: Each TJJD youth is entitled to have certain basic rights, have access to a complaint system that is confidential, and have her/his personal funds handled in a safe and prudent manner.

- 1. TFL as an agency, and all foster parents subcontracting with TFL, understand the basic rights that each TJJD youth is entitled to.
- 2. Privileges afforded a youth in care may include extended telephone time, later bedtimes, watching movies with other residents, visits with foster parents' family members, trips to the mall for spending allowances, attending sports events with foster dad, etc. These privileges are delivered when the youth complies with all house rules (see attached example of house rules) and the assessment is made by the foster parent, with input from other residents, based upon the level board system described above.

- 3. The process for handling youth complaints is addressed in TFL Policy stating that "children have the right to report abuse, neglect, exploitation, or violation of personal rights without fear of punishment, interference, coercion, or retaliation." Confidentiality of the complaint process is addressed in TFL Policy stating that children have a right to confidentiality within the Treatment Team. A complaint system is described in TFL Policy, specific for registering complaints regarding any restraint. Additionally the Children's Rights and Privileges form contains a section for youth to register any complaint, which is reviewed by the Treatment Team staff and followed up. (See attached Children's Rights and Privileges form.)
- 4. TFL agrees to participate in TJJD's Youth Complaint automated system as described in TJJD General Administrative Policy.
- 5. TFL policy addresses handling youth's personal funds. The procedure is to account for a child's money separately from the agency's funds or the funds of the foster family with whom he/she is placed. A child must not be required to use personal money to pay for room and board or transportation. Money a child earns or is given as a gift or allowance must remain his/her personal property. Service planning includes money management and assisting the youth in establishing a personal bank account.

O. BEHAVIORAL MANAGEMENT/MODIFICATION SYSTEM:

TFL foster parents receive Skills Trainings such as Aggression Replacement Training and Defiant Child. These trainings along with others prepare foster parents to handle and modify unwanted behavior in foster children.

P. SAMPLE OF CASE PAN UTILIZED BY PROGRAM:

See attached

Q. UNDERSTANDING AND ACCEPTANCE OF TJJD CONTRACT PROVISIONS, CERTIFICATIONS AND REPRESENTATIONS:

TFL understands and accepts the TJJD contract provisions, certifications and representations,

R. AGREEMENT TO EXECUTE CONTRACT AT TIME OF AWARD:

TFL agrees to execute the contract at the time of award if the contract is awarded to TFL.



INDIVIDUALIZED CASE PLAN (ICP)

Name: Birth date: Age: Case Manager: TFL Placement Date: Foster Family Name: FF Address: School Status: Limited English Proficiency:	ICP Date: TYC No.: Primary Service Worker: TYC Referral Date: Classification: Committing Offense: Sex Offender Registration Required:Yes No Community Service Status: Employment Status:
Bio Evaluation Approved: Yes No Bio Placement Objections:	Minimum Length of Stay:(Case Manager will discuss with TYC Specialist)

ASSESSMENT PROFILE

Risk factors can keep youth from living a productive life. Protective factors help youth lead a successful and productive life. Based on a review of the assessments and individual factors, the following are the most important issue(s) to be addressed during the next 30 days.

Risk Factors

Protective Factors

0%	25%	50%	75%	100%	ASSESSMENTS	0%	25%	50%	75%	100%
					Behavioral					
				-	Community Re-Entry					
					Educational					
					Emotional					
					Employment					
					Family					
					Medical / Mental Health					
					Skills					
					Social					
					Specialized Treatment					

(Place an "X" at the estimated percent that you believe corresponds for each assessment. Example using the employment assessment: If the individual had a goal set to send out 2 resumes per week over the 30 day assessment period (total of 8 resumes for 4 weeks) and they only sent out 4 resumes, you would put an X at the 50% line.)



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